

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	Selam M		06-25-01
O.I.P.E. CLASSIFIER			7/12/01
FORMALITY REVIEW	MD	Jarr	08/14/01
RESPONSE FORMALITY REVIEW	int -	571	10/04/01

INDEX OF CLAIMS

☒ Rejected  
☐ Allowed  
☐ (Through numeral) Canceled  
☐ Restricted  
☐ N Non-elected  
☐ I Interference  
☐ A Appeal  
☐ O Objected

Claim	Date	Claim	Date	Claim	Date
1		51		101	
2		52		102	
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If more than 150 claims or 10 actions  
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